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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	091 524,590	
	Filing Date	3-14-2000	
	First Named Inventor	Krause	
	Art Unit	2176	
	Examiner Name	Chau T Nguyen	
Total Number of Pages in This Submission	3	Attorney Docket Number	

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name			
Signature	<i>Philip R Krause</i>		
Printed name	PHILIP R KRAUSE		
Date	03 MARCH 2005	Reg. No.	

CERTIFICATE OF TRANSMISSION/MAILING TO 703-872-9306			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Signature	<i>Philip R Krause</i>		
Typed or printed name	PHILIP R KRAUSE	Date	03 MARCH 2005

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PTO/SB/31 (05-04)

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<p>I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____</p> <p>Signature _____</p> <p>Typed or printed name _____</p>		<p>In re Application of <u>Philip Krause</u></p> <table border="1"> <tr> <td>Application Number <u>091524,590</u></td> <td>Filed <u>3-14-2000</u></td> </tr> <tr> <td colspan="2">For <u>Method & apparatus for enhancing electronic reading by identifying relationship betw. text</u></td> </tr> <tr> <td>Art Unit <u>2176</u></td> <td>Examiner <u>Chau T Nguyen</u></td> </tr> </table>		Application Number <u>091524,590</u>	Filed <u>3-14-2000</u>	For <u>Method & apparatus for enhancing electronic reading by identifying relationship betw. text</u>		Art Unit <u>2176</u>	Examiner <u>Chau T Nguyen</u>
Application Number <u>091524,590</u>	Filed <u>3-14-2000</u>								
For <u>Method & apparatus for enhancing electronic reading by identifying relationship betw. text</u>									
Art Unit <u>2176</u>	Examiner <u>Chau T Nguyen</u>								
<p>Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.</p>									
<p>The fee for this Notice of Appeal is (37 CFR 41.20(b)(1))</p>		<p>\$ <u>500</u></p>							
<p><input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is:</p>		<p>\$ <u>250</u></p>							
<p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p>									
<p><input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p>									
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<p><input type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. _____. I have enclosed a duplicate copy of this sheet.</p>									
<p><input type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.</p>									
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<p>I am the</p>									
<p><input checked="" type="checkbox"/> applicant/inventor.</p>		<p><u>Philip Krause</u> Signature</p>							
<p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)</p>		<p><u>PHILIP R KRAUSE</u> Typed or printed name</p>							
<p><input type="checkbox"/> attorney or agent of record. Registration number _____</p>		<p><u>301-365-8555</u> Telephone number</p>							
<p><input type="checkbox"/> attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. _____</p>		<p><u>03 MARCH 2005</u> Date</p>							
<p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p>									
<p><input checked="" type="checkbox"/> Total of <u>1</u> forms are submitted.</p>									

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